1231 I Street, Sa	acramento, CA 958	814			Insp Area:	4	
				2.5	Thos Bros:	278 C3	e la la
Site Address: 100	90 GRAND AV SAC	i.			0.1. 7	COM	
	2-0131-001				Sub-Type: Housing (Y/N	COM	
747001110, 252	. 0151-001		e de la companya de	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Tiousing (1/14	J: 18	4/3
CONTRACTOR		<u>OWNER</u> SIERRA CEI 1990 GRANI	NTRAL INVESTMENT IN	VC	ARCHITECT		
			NTO CA 95838		ing a second	e State	.3 3 0
Nature of Work: (CUT IN NEW EXTERIO	OR DOOR,	AND BLOCK OFF E	EXISTING	DOOR.		
CONSTRUCTION L	ENDING AGENCY: Ih	ereby affirm u	inder penalty of perjury tha	t there is a co	onstruction lending age	ency for the p	erformance
of the work for which fill	is permit is issued (Sec. 3097,	Civ. C).					
Lender's Name	13. 34 38. 37		Lender'sAddress			<u> </u>	The Late of
LICENSED CONTR (commencing with section	ACTORS DECLARATI on 7000) of Division 3 of the I	ON: I hereb Business and P	y affirm under penalty of Professions Code and my lie	perjury that	I am licensed under	provisions of	Chapter 9
License Class	License Number Date		_ Contractor Signature				
OWNED DITT DES	DECLARATION: I her	1				T	
of the Contractors Licen exempt therefrom and the	issuance, also requires the ap se Law (Chapter 9 (commen e basis for the alleged exemp five hundred dollars (\$500.00	cing with Sec tion. Any viol	tion 7000) of Division 8 of	of the Busine	ess and Professions Co	ode) or that he	e or she is
thereon, and who does so sale. If, however, the bunot build or improve for the I, as owner of the	e property, am exclusively co	or through his/ d within one y ontracting with	her own employees, provide year of completion, the own h licensed contractors to c	ded that such mer-builder v	n improvements are no vill have the burden of project (Sec. 7044, B	t intended or f proving that susiness and I	offered for he/she did Professions
contractor(s) licensed pur	License Law does not apply to rsuant to the Contractors Licen	o an owner of nse Law).	property who builds or im	proves there	on, and who contracts	for such proje	ects with a
I am exempt under		& PC for this	- A	<u>, , </u>		<u> </u>	
Date /2/28/	<u>/a/</u> 0	wner Signatur	· Michael	EKS	roles)		
all measurements and loc or private agreement rela	ILDING PERMIT, the applications shown on the application to permissible or prohibition of any private agreer	ion or accompa ted locations fi	anying drawings and that to such improvements. The	the improven iis building p	nent to be constructed	does not viola	ate any law
I certify that I have read relating to building const	this application and state the ruction and herby authorize re	at all informat epresentative(s	ion is correct. I agree to (s) of this city to enter upon	comply with the aboveme	all city and county or ntioned property for in	rdinances and ispection purp	state laws oses.
Date /2/28/	D /	.pplicant/Agen	t Signature <i>Muc</i>	harf	5 thm	oles	<mark>∕</mark> Dairy -
I have and will ma	ENSATION DECLARAT intain a certificate of consent which the permit is issued.	ION: I hereb	by affirm under penalty of p	perjury one o	f the following declara for by Section 3700 o	itions: f the Labor Co	ode, forthe
		:: :::::::::::::::::::::::::::::::::::	All Can value of the page				
	aintain workers' compensation d. My workers' compensation	n insurance car	rrier and policy number are	; :	or Code, for the perio	rmance of the	e work for
Carrier	ures est a chies	Nation Nation	Policy Number (.A.)	ING	Exp Date	e va	LeN L
shall not employ any per	not be completed if the perm son in any manner so as to t mpensation provisions of Sec	nit is for \$100 become subjec	t to the workers' compens	e performano ation laws o	f California and agree	that if I shou	is issued, I ıld become
Date 12/28/0.	<u>/ </u>	pplicant Signa	ture Much	D 5	throle	ر ا	afi kalai
CRIMINAL PENALTIES	TO SECURE WORKER'S OF AND CIVIL FINES UP TAGES AS PROVIDED FOR	COMPENSAT TO ONE HUN	ION COVERAGE IS UNI NDRED THOUSAND DO	LLARS (\$1	00,000) IN ADDITIO	N TO THE	

Permit No: 0116248

CITY OF SACRAMENTO

THIS PERMIT SHALL EXPIRE BY LIMITATION IF WORK IS NOT COMMENCED WITHIN 180 DAYS.

REQUEST FOR PLANNING STAFF REVIEW

..... to be filled out by Building staff CUSTOMER NAME: GRAND AVE PROJECT ADDRESS: __ MANE EXTERTOR DOOR LOCATION PROJECT DESCRIPTION: DOES THE PROJECT INCLUDE ANY OF THE FOLLOWING TYPES OF WORK? NO New Buildings OR Exterior Work to Existing Buildings NO Site Work (changes to Parking, outdoor Equipment, etc) NO " Change in Use OR Expansion of Existing Use YES If customer answers "YES" to any of the above questions, application requires Planning review. Planning staff to fill out reverse side of this form. If customer answers "NO" to ALL of the above questions, do not send application to Planning. DATE: 12-19-1/ BY: Confirmed by Building staff: If, in reviewing the project plans for Building Permit application, there are any issues identified by Building staff that appear to require Planning staff review, please indicate those issues below and send the customer to Planning. BUILDING STAFF COMMENTS:

DATE: ______ BY: _____

OWNER-BUILDER VERIFICATION

ATTENTION PROPERTY OWNERS

An owner-builder building permit has been applied for in your name and bearing your signature.

Please complete and return this information in the envelope provided at your earliest opportunity to avoid unnecessary delay in processing and issuing your building permit. No building permit will be issued until this verification is received.

1.	I personally plan to provide the major labor and materials for construction of the proposed Improvement (yes or no)	i		
2.	I (have/have not) signed an application A building permit for the proposed work.	signed an application for		
3.	I have contracted with the following person (firm) to provide the proposed construction:			
	NameAddress			
	CityTelephone	_		
	Contractors License No.			
4.	I plan to provide portions of the work, but I have hired the following person to coordinate Supervise, and provide the major work.	' ,		
-	NameAddress			
	CityTelephone			
	Contractors License No.			
5.	I will provide some of the work but I have contracted (hired) the following to provide the Work indicated:			
	Name Address Phone Type of work			
Sig	ned Michaf Etmoles			
	Address 1990 G-RAND AVIO			
Pe	mit No:			